

**Application Data Sheet**  
**Application Information**

**Application number::**

**Filing Date::**

**Application Type::** Regular

**Subject Matter::** Utility

**Suggested classification::**

**Suggested Group Art Unit::**

**CD-ROM or CD-R?::** None

**Number of CD disks::**

**Number of copies of CDs::**

**Sequence submission?::** Paper

**Computer Readable Form (CRF)?::** No

**Number of copies of CFR::**

**Title::** METHOD FOR TRANSACTION  
PROCESSING WITH PARALLEL  
EXECUTION

**Attorney Docket Number::** BEAS-01337US2

**Request for Early Publication?::** No

**Request for Non-Publication?::** No

**Suggested Drawing Figure::** 4

**Total Drawing Sheets::** 8

**Small Entity?::** No

**Latin name::**

**Variety denomination name::**

**Petition included?::** No

**Petition Type::**

**Licensed US Govt. Agency::** No

**Contract or Grant Numbers::**

**Secrecy Order in Parent Appl.?:** No

## **Applicant Information**

**Applicant Authority Type::** Inventor

**Primary Citizenship Country::** US

**Status::** Full Capacity

**Given Name::** Alexander

**Middle Name::** J.

**Family Name::** Somogyi

**Name Suffix::**

**City of Residence::** Bernardsville

**State or Province of Residence::** NJ

**Country of Residence::** US

**Street of mailing address::** 87 Ravine Lake Road

**City of mailing address::** Bernardsville

**State or Province of mailing address::** NJ

**Country of mailing address::** US

**Postal or Zip Code of mailing address::** 07924

**Applicant Authority Type::** Inventor

**Primary Citizenship Country::** US

**Status::** Full Capacity

**Given Name::** Adam

**Middle Name::**

**Family Name::** Messinger

**Name Suffix::**  
**City of Residence::** San Francisco  
**State or Province of Residence::** CA  
**Country of Residence::** US  
**Street of mailing address::** 317 29<sup>th</sup> Street, Apt. 306  
**City of mailing address::** San Francisco  
**State or Province of mailing address::** CA  
**Country of mailing address::** US  
**Postal or Zip Code of mailing address::** 94131

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Anno  
**Middle Name::** R.  
**Family Name::** Langen  
**Name Suffix::**  
**City of Residence::** Berkeley  
**State or Province of Residence::** CA  
**Country of Residence::** US  
**Street of mailing address::** 973 Indian Rock  
**City of mailing address::** Berkeley  
**State or Province of mailing address::** CA  
**Country of mailing address::** US  
**Postal or Zip Code of mailing address::** 94707

### **Correspondence Information**

**Correspondence Customer Number::** 23910  
**Phone number::** (415) 362-3800  
**Fax Number::** (415) 362-2928  
**Email address::** SBachmann@fdml.com

### **Representative Information**

**Representative Customer Number::** 23910

### **Domestic Priority Information**

| <b>Application::</b> | <b>Continuity Type::</b>  | <b>Parent Application::</b> | <b>Parent Filing Date::</b> |
|----------------------|---|-----------------------------|-----------------------------|
| This Application     | An Application claiming the benefit under 35 USC 119(e) Provisional | 60/442,319                  | 01/24/03                    |

### **Foreign Priority Information**

| <b>Country::</b> | <b>Application Number::</b> | <b>Filing Date::</b> | <b>Priority Claimed::</b> |
|------------------|-----------------------------|----------------------|---------------------------|
|                  |                             |                      |                           |

## **Assignee Information**

|  |                         |
|--|-------------------------|
| <b>Assignee Name::</b>                         | BEA Systems, Inc.       |
| <b>Street of mailing address::</b>             | 2315 North First Street |
| <b>City of mailing address::</b>               | San Jose                |
| <b>State or Province of mailing address::</b>  | CA                      |
| <b>Country of mailing address::</b>            | US                      |
| <b>Postal or Zip Code of mailing address::</b> | 95131                   |